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Case 08-26831 **B1** (Official Form 1) (1/08) Doc 1 Filed 10/07/08 Entered 10/07/08 12:25:52 Desc Main Document Page 1 of 39 **United States Bankruptcy Court Voluntary Petition Northern District of Illinois** Name of Debtor (if individual, enter Last, First, Middle): Name of Joint Debtor (Spouse) (Last, First, Middle): Fitzpatrick, Chrishonee A All Other Names used by the Debtor in the last 8 years All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): (include married, maiden, and trade names): Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 4134 EIN (if more than one, state all): Street Address of Debtor (No. & Street, City, State & Zip Code): Street Address of Joint Debtor (No. & Street, City, State & Zip Code): 4015 Richmond Ct Matteson, IL ZIPCODE 60443 ZIPCODE County of Residence or of the Principal Place of Business: County of Residence or of the Principal Place of Business: Cook Mailing Address of Debtor (if different from street address) Mailing Address of Joint Debtor (if different from street address): ZIPCODE ZIPCODE Location of Principal Assets of Business Debtor (if different from street address above): ZIPCODE Type of Debtor **Nature of Business** Chapter of Bankruptcy Code Under Which (Form of Organization) (Check **one** box.) the Petition is Filed (Check one box.) (Check one box.) Chapter 7 Chapter 15 Petition for Health Care Business ✓ Individual (includes Joint Debtors) Single Asset Real Estate as defined in 11 Chapter 9 Recognition of a Foreign See Exhibit D on page 2 of this form. U.S.C. § 101(51B) Chapter 11 Main Proceeding Corporation (includes LLC and LLP) Railroad Chapter 12 Chapter 15 Petition for Stockbroker
Commodity Broker Partnership Chapter 13 Recognition of a Foreign Other (If debtor is not one of the above entities, Nonmain Proceeding check this box and state type of entity below.) Clearing Bank **Nature of Debts** Other (Check one box.) Debts are primarily consumer Debts are primarily debts, defined in 11 U.S.C. Tax-Exempt Entity business debts. (Check box, if applicable.) § 101(8) as "incurred by an Debtor is a tax-exempt organization under individual primarily for a Title 26 of the United States Code (the personal, family, or house-Internal Revenue Code). hold purpose." Filing Fee (Check one box) **Chapter 11 Debtors** Check one box: Full Filing Fee attached § 101(51D). .C. § 101(51D). o non-insiders or e or more classes of HIS SPACE IS FOR OURT USE ONLY

Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. Check all applicable boxes: A plan is being filed with this petition Acceptances of the plan were solicited prepetition fro creditors, in accordance with 11 U.S.C. § 1126(b).						U.S				
☐ Deb ✓ Deb distr	Statistical/Administrative Information Debtor estimates that funds will be available for distribution to unsecured creditors. Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.									
Estimate 1-49	d Number of 50-99	Creditors	□ 200-999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	Over 100,000	
Estimate \$0 to \$50,000 Estimate \$0 to		\$100,001 to \$500,000	\$500,001 to \$1 million	\$10 million	to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion More than	
\$50,000	\$100,000	\$500,000	\$1 million	\$10 million	to \$50 million	\$100 million	to \$500 million	to \$1 billion	\$1 billion	

Prior Bankruptcy Case Filed Within Last	8 Years (If more than two, attack	h additional sheet)
Location Where Filed: None	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debtor (If m	ore than one, attach additional sheet)
Name of Debtor: None	Case Number:	Date Filed:
District:	Relationship:	Judge:
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) Exhibit A is attached and made a part of this petition.	(To be completed whose debts are partial I, the attorney for the petitioner that I have informed the petition chapter 7, 11, 12, or 13 of the explained the relief available to	Exhibit B d if debtor is an individual primarily consumer debts.) r named in the foregoing petition, declare oner that [he or she] may proceed under title 11, United States Code, and have under each such chapter. I further certify the notice required by § 342(b) of the
	X /s/ Troy L Gleason	10/07/08
	Signature of Attorney for Debtor(s)	
Exhi (To be completed by every individual debtor. If a joint petition is filed, e Exhibit D completed and signed by the debtor is attached and ma If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached.	ade a part of this petition.	tach a separate Exhibit D.)
		this District for 180 days immediately
☐ There is a bankruptcy case concerning debtor's affiliate, general	partner, or partnership pending ir	n this District.
Debtor is a debtor in a foreign proceeding and has its principal proceeding and principal place of business or assets in the United States in this District, or the interests of the parties will be served in reg	but is a defendant in an action or p	proceeding [in a federal or state court]
Certification by a Debtor Who Resid		l Property
(Check all app Landlord has a judgment against the debtor for possession of debtor	blicable boxes.) btor's residence. (If box checked,	complete the following.)
(Name of landlord or less	or that obtained judgment)	
(Address of lar	ndlord or lessor)	

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

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Name of Debtor(s):

Fitzpatrick, Chrishonee A

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B1 (Official Form 1) (1/08) Document

(This page must be completed and filed in every case)

Voluntary Petition

filing of the petition.

Document

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s): Fitzpatrick, Chrishonee A

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Chrishonee A Fitzpatrick

Signature of Debtor

Chrishonee A Fitzpatrick

Χ Signature of Joint Debtor

Telephone Number (If not represented by attorney)

October 7, 2008

Signature of Attorney*

X /s/ Troy L Gleason

Signature of Attorney for Debtor(s)

Troy L Gleason 6276510

Printed Name of Attorney for Debtor(s)

Gleason & Gleason

Firm Name

77 W Washington, Ste 1218

Address

Chicago, IL 60602

(312) 578-9530

Telephone Number

October 7, 2008

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
- ☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

^{*}In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Case 08-26831 Official Form 1, Exhibit D (10/06)

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Northern District of Illinois

IN RE:	Case No
Fitzpatrick, Chrishonee A	Chapter 7
Debtor(s)	
EXHIBIT D - INDIVIDUAL DEBTOR'S WITH CREDIT COUNSES	
Warning: You must be able to check truthfully one of the five stat do so, you are not eligible to file a bankruptcy case, and the court whatever filing fee you paid, and your creditors will be able to re- and you file another bankruptcy case later, you may be required to stop creditors collection activities.	can dismiss any case you do file. If that happens, you will lose sume collection activities against you. If your case is dismissed
Every individual debtor must file this Exhibit D. If a joint petition is file one of the five statements below and attach any documents as directed	
1. Within the 180 days before the filing of my bankruptcy case , the United States trustee or bankruptcy administrator that outlined the performing a related budget analysis, and I have a certificate from the a certificate and a copy of any debt repayment plan developed through	e opportunities for available credit counseling and assisted me in agency describing the services provided to me. Attach a copy of the
2. Within the 180 days before the filing of my bankruptcy case , the United States trustee or bankruptcy administrator that outlined the performing a related budget analysis, but I do not have a certificate from a copy of a certificate from the agency describing the services provide the agency no later than 15 days after your bankruptcy case is filed.	e opportunities for available credit counseling and assisted me in m the agency describing the services provided to me. You must file
3. I certify that I requested credit counseling services from an apprehays from the time I made my request, and the following exigent of requirement so I can file my bankruptcy case now. [Must be accompanie circumstances here.]	circumstances merit a temporary waiver of the credit counseling
If the court is satisfied with the reasons stated in your motion, it	will cond you on order emproving your request. Vou must still
If the court is satisfied with the reasons stated in your motion, it obtain the credit counseling briefing within the first 30 days after you the agency that provided the briefing, together with a copy of an extension of the 30-day deadline can be granted only for cause and be filed within the 30-day period. Failure to fulfill these requires satisfied with your reasons for filing your bankruptcy case without dismissed.	ou file your bankruptcy case and promptly file a certificate from by debt management plan developed through the agency. Any is limited to a maximum of 15 days. A motion for extension must ments may result in dismissal of your case. If the court is not
4. I am not required to receive a credit counseling briefing because motion for determination by the court.]	
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by of realizing and making rational decisions with respect to final	ncial responsibilities.);
Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically i participate in a credit counseling briefing in person, by telepho	mpaired to the extent of being unable, after reasonable effort, to one, or through the Internet.);

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h)

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Chrishonee A Fitzpatrick

Active military duty in a military combat zone.

Date: October 7, 2008

does not apply in this district.

NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

<u>Chapter 7</u>: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in instalments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them,

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using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

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A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by $\S 342(b)$ of the Bankruptcy Code.

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer,
principal, responsible person, or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Fitzpatrick, Chrishonee A	X /s/ Chrishonee A Fitzpatrick	10/07/2008
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X	
	Signature of Joint Debtor (if any)	Date

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Northern District of Illinois

Desc Main

IN RE:		Case No.
Fitzpatrick, Chrishonee A		Chapter 7
Γ	ehtor(s)	1

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 0.00		
B - Personal Property	Yes	3	\$ 5,200.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 6,959.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	2		\$ 17,179.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 1,706.22
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 1,705.00
	TOTAL	13	\$ 5,200.00	\$ 24,138.00	

Form 6 - Statistical Summary (12/07)1 Doc 1

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Northern District of Illinois

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IN RE:		Case No.
Fitzpatrick, Chrishonee A		Chapter 7
Del	tor(s)	1

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

State the following:

Average Income (from Schedule I, Line 16)	\$ 1,706.22
Average Expenses (from Schedule J, Line 18)	\$ 1,705.00
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C	
Line 20)	\$ 2,327.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 4,209.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 17,179.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 21,388.00

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(If known)

IN RE Fitzpatrick, Chrishonee A

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Debtor(s)

Case No. _____

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				

TOTAL

(Report also on Summary of Schedules)

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(If known)

IN RE Fitzpatrick, Chrishonee A

Debtor(s) Case No. _

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1.	Cash on hand.	Х			
2.	Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking account		100.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, include audio, video, and computer equipment.		Household goods, including but not limited to: TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances.		1,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Х			
6.	Wearing apparel.		Clothes		250.00
7.	Furs and jewelry.		Costume jewelry less than \$500 per piece		100.00
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Term life thru work - no cash value		0.00
10.	Annuities. Itemize and name each issue.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		401K		1,000.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	Х			
14.	Interests in partnerships or joint ventures. Itemize.	X			

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_ Case No. __

IN RE Fitzpatrick, Chrishonee A

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

				T	
	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15.	Government and corporate bonds and other negotiable and non-negotiable instruments.	Х			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		00 Dodge Stratus		2,750.00
26.	Boats, motors, and accessories.	X			
	Aircraft and accessories.	X			
	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	Х			
	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	Х			

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Debtor(s)

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(If known)

IN RE Fitzpatrick, Chrishonee A

_ Case No. __

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	(Continuation Sheet)								
TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION					
 33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not already listed. Itemize. 	XXX								
		TO	ΓAL	5,200.00					

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(If known)

IN RE Fitzpatrick, Chrishonee A

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SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: (Check one box)

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
SCHEDULE B - PERSONAL PROPERTY			
Checking account	735 ILCS 5 §12-1001(b)	100.00	100.00
Household goods, including but not imited to: TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances.	735 ILCS 5 §12-1001(b)	1,000.00	1,000.00
Clothes	735 ILCS 5 §12-1001(a)	250.00	250.00
Costume jewelry less than \$500 per piece	735 ILCS 5 §12-1001(b)	100.00	100.00
401K	735 ILCS 5 §12-1006(a)	1,000.00	1,000.00
00 Dodge Stratus	735 ILCS 5 §12-1001(c)	2,400.00	2,750.00

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IN RE Fitzpatrick, Chrishonee A

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SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 201000278			Installment account opened 10/07				6,959.00	4,209.00
Gateway Fin 6200 State St Saginaw, MI 48603			VALUE \$ 2.750.00					
ACCOUNT NO.			VALUE \$ 2,750.00	\vdash				
			VALUE \$					
ACCOUNT NO.				-				
			VALUE \$					
ACCOUNT NO.			VALUE \$					
ocntinuation sheets attached			(Total of th		otota		\$ 6,959.00	\$ 4,209.00
			(Use only on la		Tota page		\$ 6,959.00	\$ 4,209.00

(Report also on Summary of Schedules.) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

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IN RE Fitzpatrick, Chrishonee A

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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

	,
liste	eport the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority d on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on Statistical Summary of Certain Liabilities and Related Data.
V	Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TY	PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
	Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
	Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
	Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
	Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
	Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
	Deposits by individuals Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
	Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
	Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
	Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).
	* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.
	0 continuation sheets attached

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(If known)

IN RE Fitzpatrick, Chrishonee A

Case No. Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

	_						
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 486236720211			Revolving account opened 10/04				
Cap One Po Box 85520 Richmond, VA 23285							468.00
ACCOUNT NO. 1002853165			Open account opened 3/05				
Cfc Deficiency Recover 27777 Franklin Rd Southfield, MI 48034							6,190.00
ACCOUNT NO.			Assignee or other notification for:				5,155155
Asset Acceptance PO Box 2036 Warren, MI 48090-2036			Cfc Deficiency Recover				
ACCOUNT NO.			Loan				
Check Into Cash 8547 S Cicero Chicago, IL 60652							500.00
1 continuation sheets attached				Sub			s 7,158.00
conunuation sneets attached			(Total of th	-	age Fota	1	\$ 1,156.00
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules and, if applicable, on the St Summary of Certain Liabilities and Relate	als	o o	n ıl	\$

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IN RE Fitzpatrick, Chrishonee A

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 5178007239719867			Revolving account opened 1/04			H	
First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104							331.00
ACCOUNT NO. 5178007967398835	T		Revolving account opened 4/08	H		H	331100
First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104							300.00
ACCOUNT NO. 08M1-119698	\vdash		Judgment	\vdash		H	300.00
HBLC C/O Steven Fink 25 E Washington Ste 1233 Chicago, IL 60602							2,850.00
ACCOUNT NO. 5440455002272568			Revolving account opened 12/99			H	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Hsbc Bank Po Box 5253 Carol Stream, IL 60197							760.00
ACCOUNT NO.			Loan	\vdash		H	700.00
Payday Loan Store 4838 S Cicero Chicago, IL 60638							
20002252056440			Collections	\vdash		H	350.00
ACCOUNT NO. 30003353856110 Target National Bank Bankruptcy Dept Po Box 1327 Minneapolis, MN 55440			Concentrations				E 420.00
ACCOUNT NO.			Assignee or other notification for:	+		H	5,430.00
Asset Acceptance PO Box 2036 Warren, MI 48090-2036			Target National Bank				
Sheet no1 of1 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Sub nis p		- 1	\$ 10,021.00
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate	t als tatis	tica	n al	\$ 17,179.00

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Debtor(s)

IN RE Fitzpatrick, Chrishonee A

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#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE<br>OF OTHER PARTIES TO LEASE OR CONTRACT | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
|---------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                       |                                                                                                                                                                              |
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IN RE Fitzpatrick, Chrishonee A

Debtor(s)

Case No. \_\_\_\_\_(If known)

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
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#### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

| Debtor's Marital Status                                              |                                         | DEPENDENTS OF I                                                                                  | DEBTOR ANI  | SPOU     | SE                        |          |        |
|----------------------------------------------------------------------|-----------------------------------------|--------------------------------------------------------------------------------------------------|-------------|----------|---------------------------|----------|--------|
| Single                                                               |                                         | RELATIONSHIP(S):                                                                                 |             |          |                           | AGE(S):  |        |
| EMPLOYMENT:                                                          |                                         | DEBTOR                                                                                           |             |          | SPOUSE                    |          |        |
| Occupation Name of Employer How long employed Address of Employer    | Visual Merch<br>Foot Locker<br>12 years |                                                                                                  |             |          |                           |          |        |
|                                                                      | gross wages, sa                         | r projected monthly income at time case filed) alary, and commissions (prorate if not paid month | ıly)        | \$<br>\$ | DEBTOR<br><b>2,327.00</b> |          | SPOUSE |
| 3. SUBTOTAL                                                          |                                         |                                                                                                  |             | \$       | 2,327.00                  | \$       |        |
| 4. LESS PAYROLI a. Payroll taxes an                                  |                                         |                                                                                                  |             | \$       | 442.42                    |          |        |
| <ul><li>b. Insurance</li><li>c. Union dues</li></ul>                 |                                         |                                                                                                  |             | \$ ——    | 131.00                    | Φ.       |        |
| d. Other (specify)                                                   | 401K                                    |                                                                                                  |             | \$       | 46.56                     |          |        |
|                                                                      |                                         |                                                                                                  |             | \$       |                           | \$       |        |
| 5. SUBTOTAL OF                                                       | F PAYROLL I                             | DEDUCTIONS                                                                                       |             | \$       | 620.78                    | \$       |        |
| 6. TOTAL NET M                                                       | IONTHLY TA                              | KE HOME PAY                                                                                      |             | \$       | 1,706.22                  | \$       |        |
| 7. Regular income f<br>8. Income from real<br>9. Interest and divide | property                                | of business or profession or farm (attach detailed                                               | statement)  | \$<br>\$ |                           | \$<br>\$ |        |
|                                                                      | enance or supposited above              | ort payments payable to the debtor for the debtor                                                | 's use or   | \$<br>\$ |                           | \$<br>\$ |        |
|                                                                      |                                         | ment assistance                                                                                  |             | \$       |                           | \$       |        |
|                                                                      |                                         |                                                                                                  |             | \$       |                           | \$       |        |
| 12. Pension or retire 13. Other monthly i                            |                                         |                                                                                                  |             | \$       |                           | \$       |        |
| (Specify)                                                            |                                         |                                                                                                  |             | \$       |                           | \$       |        |
|                                                                      |                                         |                                                                                                  |             | \$       |                           | \$       |        |
|                                                                      |                                         |                                                                                                  |             | \$       |                           | \$       |        |
| 14. SUBTOTAL O                                                       | F LINES 7 TH                            | HROUGH 13                                                                                        |             | \$       |                           | \$       |        |
| 15. AVERAGE M                                                        | ONTHLY INC                              | <b>COME</b> (Add amounts shown on lines 6 and 14)                                                |             | \$       | 1,706.22                  | \$       |        |
|                                                                      |                                         | ONTHLY INCOME: (Combine column totals frotal reported on line 15)                                | om line 15; |          | \$                        | 1,706.2  | 22     |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: None

IN RE Fitzpatrick, Chrishonee A

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Debtor(s)

\_\_\_\_\_ Case No. \_\_\_\_

| SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>(S)</b>        |             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------------|
| Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the decon Form22A or 22C.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                   |             |
| Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | a separate        | schedule of |
| expenditures labeled "Spouse."                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ı                 |             |
| 1. Rent or home mortgage payment (include lot rented for mobile home)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | \$                | 500.00      |
| a. Are real estate taxes included? Yes No <u>✓</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                   |             |
| b. Is property insurance included? Yes No ✓                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                   |             |
| 2. Utilities:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                   |             |
| a. Electricity and heating fuel                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | \$                |             |
| b. Water and sewer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | \$                |             |
| c. Telephone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | \$                | 50.00       |
| d. Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | \$                |             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | - \$              |             |
| 3. Home maintenance (repairs and upkeep)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                   |             |
| 4. Food                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | \$                | 375.00      |
| 5. Clothing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | \$                | 100.00      |
| 6. Laundry and dry cleaning                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | \$                | 50.00       |
| 7. Medical and dental expenses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | \$                | 20.00       |
| 8. Transportation (not including car payments)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | \$                | 200.00      |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | \$ ——             |             |
| 10. Charitable contributions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | \$ ——             |             |
| 11. Insurance (not deducted from wages or included in home mortgage payments)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Ψ                 |             |
| a. Homeowner's or renter's                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | \$                |             |
| b. Life                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | \$ ——             |             |
| c. Health                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | \$ ——             |             |
| d. Auto                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | \$ ——             | 110.00      |
| e. Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | \$ ——             | 110.00      |
| c. Onici                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | — ¢ —             |             |
| 12. Taxes (not deducted from wages or included in home mortgage payments)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | — • —             |             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | •                 |             |
| (Specify)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | $$ $^{\psi}$ $$   |             |
| 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | — <sup>ф</sup> —— |             |
| a. Auto                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | \$                | 300.00      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>ў</b> ——       | 300.00      |
| b. Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | — ÷—              |             |
| 14. A1'                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | — ÷ —             |             |
| 14. Alimony, maintenance, and support paid to others                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 2 —               |             |
| 15. Payments for support of additional dependents not living at your home                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 2 —               |             |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | \$                |             |
| 17. Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | \$                |             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 4                 |             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | \$                |             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |             |
| <b>18. AVERAGE MONTHLY EXPENSES</b> (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | \$                | 1,705.00    |
| 10 Describe and in the description of the descripti | C 41-1-1-1        |             |
| 19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of <b>None</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | this docur        | nent:       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |             |
| AA CTATEMENT OF MONTH VAICT INCOME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                   |             |

#### 20. STATEMENT OF MONTHLY NET INCOME

| a. Average monthly income from Line 15 of Schedule I | \$<br>1,706.22 |
|------------------------------------------------------|----------------|
| b. Average monthly expenses from Line 18 above       | \$<br>1,705.00 |
| c. Monthly net income (a. minus b.)                  | \$<br>1.22     |

Document

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(If known)

(Print or type name of individual signing on behalf of debtor)

IN RE Fitzpatrick, Chrishonee A

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Debtor(s)

Case No.

#### DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 15 sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: October 7, 2008 Signature: /s/ Chrishonee A Fitzpatrick Debtor **Chrishonee A Fitzpatrick** Signature: (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the \_\_\_ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief. Signature:

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

IN RE: Case No. Chapter 7 Fitzpatrick, Chrishonee A Debtor(s)

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. I1 U.S.C. § 101.

#### 1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

2,327.00 2008 Income from employment (monthly)

26,047.00 2007 Income from employment

25,000.00 2006 Income from employment

#### 2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Entered 10/07/08 12:25:52 Case 08-26831 Doc 1 Filed 10/07/08 Desc Main Page 24 of 39

**Gateway Fin** 6200 State St Saginaw, MI 48603 900.00

6,950.00

| Chrysler                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 10/07                                                            | Repo of 03 Jeep Liberty                                                                                                                                                             |  |  |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| NAME AND ADDRESS OF CREDITOR OR SELLER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | DATE OF REPOSSESSION,<br>FORECLOSURE SALE,<br>TRANSFER OR RETURN | DESCRIPTION AND VALUE<br>OF PROPERTY                                                                                                                                                |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ne commencement of this case. (M                                 | sferred through a deed in lieu of foreclosure or returned to farried debtors filing under chapter 12 or chapter 13 must not petition is filed, unless the spouses are separated and |  |  |  |  |  |
| 5. Repossessions, foreclosures and returns                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                  |                                                                                                                                                                                     |  |  |  |  |  |
| C/O Steven Fink<br>25 E Washington Ste 1233<br>Chicago, IL 60602                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 2000                                                             | Garnishment                                                                                                                                                                         |  |  |  |  |  |
| NAME AND ADDRESS OF PERSON FOR WHOSE<br>BENEFIT PROPERTY WAS SEIZED<br>HBLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | DATE OF SEIZURE 2008                                             | DESCRIPTION AND VALUE OF PROPERTY Garnishment                                                                                                                                       |  |  |  |  |  |
| the commencement of this case. (Married debtors fill or both spouses whether or not a joint petition is file                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ing under chapter 12 or chapter 1                                |                                                                                                                                                                                     |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ter 12 or chapter 13 must include i                              | within <b>one year</b> immediately preceding the filing of thi information concerning either or both spouses whether of filed.)                                                     |  |  |  |  |  |
| 4. Suits and administrative proceedings, executions, gar                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | nishments and attachments                                        |                                                                                                                                                                                     |  |  |  |  |  |
| None c. All debtors: List all payments made within <b>one year</b> immediately preceding the commencement of this case to or for the benefit who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses who a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                  |                                                                                                                                                                                     |  |  |  |  |  |
| b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within <b>90 days</b> immediant preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic sup obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Mar debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petitis filed, unless the spouses are separated and a joint petition is not filed.) |                                                                  |                                                                                                                                                                                     |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <i>tents:</i> Tast each bayment or other i                       | transfer to any creditor made within <b>90 days</b> immediatef                                                                                                                      |  |  |  |  |  |

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 7. Gifts

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None List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 8. Losses

None List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

|              | Case 08-26831 Doc 1 Filed 10/07/08 Entered 10/07/08 12:25:52 Desc Main                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|--------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|              | Document Page 25 of 39                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 9. Pa        | yments related to debt counseling or bankruptcy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| None         | List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within <b>one year</b> immediately preceding the commencement of this case.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Glea<br>77 W | DATE OF PAYMENT, NAME OF AMOUNT OF MONEY OR DESCRIPTION TE AND ADDRESS OF PAYEE PAYOR IF OTHER THAN DEBTOR AND VALUE OF PROPERTY TO Washington, Ste 1218 The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment, Name of Amount of Money or Description The payment of Money or Description The p |
| 10. O        | ther transfers                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| None         | a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within <b>two years</b> immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| None         | b. List all property transferred by the debtor within <b>ten years</b> immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 11. C        | losed financial accounts                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| None         | List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within <b>one year</b> immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| 12. S        | afe deposit boxes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| None         | List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within <b>one year</b> immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 13. S        | etoffs                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| None         | List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within <b>90 days</b> preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 14. P        | roperty held for another person                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| None         | List all property owned by another person that the debtor holds or controls.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 15. P        | rior address of debtor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| None         | If debtor has moved within <b>three years</b> immediately preceding the commencement of this case, list all premises which the debtor occupied during                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

#### 16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

 $\checkmark$ 

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

 $\checkmark$ 

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

#### 18. Nature, location and name of business

None a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

 $\checkmark$ 

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date: October 7, 2008 | Signature /s/ Chrishonee A Fitzpatrick |                          |
|-----------------------|----------------------------------------|--------------------------|
|                       | of Debtor                              | Chrishonee A Fitzpatrick |
| Date:                 | Signature                              |                          |
|                       | of Joint Debtor                        |                          |
|                       | (if any)                               |                          |
|                       | Ocontinuation pages attached           |                          |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

## Case 08-26831 Doc 1 Filed 10/07/08 Entered 10/07/08 12:25:52 Desc Main

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United States Bankruptcy Court
Northern District of Illinois

| IN RE:                                                                   |                                                                                                                                                                                |                                                                                      |                                                                    |                                                        | Case No.                                |                                     |                                                                |                                                                 |
|--------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|--------------------------------------------------------------------|--------------------------------------------------------|-----------------------------------------|-------------------------------------|----------------------------------------------------------------|-----------------------------------------------------------------|
| Fitzpatrick, Chrishonee A                                                |                                                                                                                                                                                |                                                                                      | Chapter 7                                                          |                                                        |                                         |                                     |                                                                |                                                                 |
|                                                                          | De                                                                                                                                                                             | ebtor(s)                                                                             |                                                                    |                                                        | . –                                     |                                     |                                                                |                                                                 |
|                                                                          | CHAPTER 7 IN                                                                                                                                                                   | DIVIDUAL D                                                                           | EBTOR'S STA                                                        | TEMENT O                                               | F INTEN                                 | TION                                |                                                                |                                                                 |
| I have filed a so                                                        | chedule of assets and liabilities<br>chedule of executory contracts<br>he following with respect to the                                                                        | and unexpired leas                                                                   | ses which includes                                                 | personal property                                      | y subject to a                          | an unexpiro<br>lease:               | ed lease.                                                      |                                                                 |
| Description of Secured Pro                                               | perty                                                                                                                                                                          | Creditor's Name                                                                      |                                                                    |                                                        | Property will<br>be Surrendered         | Property is<br>claimed as<br>exempt | Property will<br>be redeemed<br>pursuant to 11<br>U.S.C. § 722 | Debt will be<br>reaffirmed<br>pursuant to 11<br>U.S.C. § 524(c) |
| 00 Dodge Strati                                                          | ıs                                                                                                                                                                             | Gateway Fin                                                                          |                                                                    |                                                        |                                         |                                     |                                                                | ✓                                                               |
|                                                                          |                                                                                                                                                                                |                                                                                      |                                                                    |                                                        |                                         |                                     |                                                                | Lease will be<br>assumed<br>pursuant to 11<br>U.S.C. §          |
| Description of Leased Prop                                               | erty                                                                                                                                                                           |                                                                                      | Lessor's Name                                                      |                                                        |                                         |                                     |                                                                | 362(h)(1)(A)                                                    |
| 10/07/2008                                                               | /s/ Chrishonee A Fitzpa                                                                                                                                                        | trick                                                                                |                                                                    |                                                        |                                         |                                     |                                                                |                                                                 |
| Date                                                                     | Chrishonee A Fitzpatric                                                                                                                                                        |                                                                                      | Debtor                                                             |                                                        |                                         | Joi                                 | nt Debtor (i                                                   | f applicable)                                                   |
| I declare under percompensation and and 342 (b); and, bankruptcy petitio | enalty of perjury that: (1) I ar<br>have provided the debtor with<br>(3) if rules or guidelines have<br>n preparers, I have given the de<br>ebtor, as required by that section | n a bankruptcy pe<br>a copy of this doct<br>been promulgated<br>btor notice of the r | etition preparer as<br>ament and the notice<br>pursuant to 11 U.S. | defined in 11 U. tes and information S.C. § 110(h) set | S.C. § 110;<br>on required ting a maxin | (2) I prepunder 11 Unum fee fo      | pared this d<br>.S.C. §§ 110<br>r services ch                  | ocument for 0(b), 110(h), nargeable by                          |
| If the bankruptcy                                                        | me and Title, if any, of Bankruptcy petition preparer is not an ine, or partner who signs the doc                                                                              | dividual, state the                                                                  | name, title (if any                                                |                                                        | Social Security ocial securit           | _                                   |                                                                |                                                                 |
| Address                                                                  |                                                                                                                                                                                |                                                                                      |                                                                    |                                                        |                                         |                                     |                                                                |                                                                 |
| Signature of Bankrup                                                     | otcy Petition Preparer                                                                                                                                                         |                                                                                      |                                                                    | <u>_</u>                                               | Date                                    |                                     |                                                                |                                                                 |
| Names and Social is not an individua                                     | Security numbers of all other in<br>d:                                                                                                                                         | ndividuals who pre                                                                   | pared or assisted in                                               | preparing this do                                      | cument, unle                            | ess the banl                        | kruptcy petit                                                  | tion preparer                                                   |

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

# Case 08-26831 Doc 1 Filed 10/07/08 Entered 10/07/08 12:25:52 Desc Main Document Page 28 of 39 United States Bankruptcy Court Northern District of Illinois

| IN RE:                       |                                          | Case No                                                    |
|------------------------------|------------------------------------------|------------------------------------------------------------|
| Fitzpatrick, Chrishonee A    |                                          | Chapter 7                                                  |
|                              | Debtor(s)                                | •                                                          |
|                              | VERIFICATION OF CR                       | EDITOR MATRIX                                              |
|                              |                                          | Number of Creditors10                                      |
| The above-named Debtor(s) he | ereby verifies that the list of creditor | ors is true and correct to the best of my (our) knowledge. |
| Date: October 7, 2008        | /s/ Chrishonee A Fitzpatri               | ck                                                         |
|                              | Debtor                                   |                                                            |
|                              | Joint Debtor                             |                                                            |

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Fitzpatrick, Chrishonee A 4015 Richmond Ct Matteson, IL 60443 Document Payday Loan Store 4838 S Cicero Chicago, IL 60638

Gleason & Gleason 77 W Washington, Ste 1218 Chicago, IL 60602 Target National Bank Bankruptcy Dept Po Box 1327 Minneapolis, MN 55440

Asset Acceptance PO Box 2036 Warren, MI 48090-2036

Cap One Po Box 85520 Richmond, VA 23285

Cfc Deficiency Recover 27777 Franklin Rd Southfield, MI 48034

Check Into Cash 8547 S Cicero Chicago, IL 60652

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

Gateway Fin 6200 State St Saginaw, MI 48603

HBLC C/O Steven Fink 25 E Washington Ste 1233 Chicago, IL 60602

Hsbc Bank Po Box 5253 Carol Stream, IL 60197

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October 7, 2008

Date

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|----------|--------|------------------|----------------------------|--|
|          |        | Document         | Page 30 of 39              |  |
|          |        | United States Ba | ankruptcy Court            |  |
|          |        | Northern Dis     | trict of Illinois          |  |

| IN  | NRE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Case No                                                                                                        |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|
| Fit | tzpatrick, Chrishonee A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Chapter 7                                                                                                      |
|     | Debtor(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                |
|     | DISCLOSURE OF COMPENSATION OF ATTORNEY                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Y FOR DEBTOR                                                                                                   |
| 1.  | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-na one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to of or in connection with the bankruptcy case is as follows:                                                                                                                                                                                                                   | amed debtor(s) and that compensation paid to me within be rendered on behalf of the debtor(s) in contemplation |
|     | For legal services, I have agreed to accept                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | \$676.00                                                                                                       |
|     | Prior to the filing of this statement I have received                                                                                                                                                                                                                                                                                                                                                                                                                                                         | \$351.00                                                                                                       |
|     | Balance Due                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | \$\$ <b>325.00</b>                                                                                             |
| 2.  | The source of the compensation paid to me was: Debtor Dother (specify):                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                |
| 3.  | The source of compensation to be paid to me is: Debtor Dother (specify):                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                |
| 4.  | I have not agreed to share the above-disclosed compensation with any other person unless they are members.                                                                                                                                                                                                                                                                                                                                                                                                    | pers and associates of my law firm.                                                                            |
|     | I have agreed to share the above-disclosed compensation with a person or persons who are not members together with a list of the names of the people sharing in the compensation, is attached.                                                                                                                                                                                                                                                                                                                | or associates of my law firm. A copy of the agreement,                                                         |
| 5.  | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case                                                                                                                                                                                                                                                                                                                                                                                           | e, including:                                                                                                  |
|     | <ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to be the preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned heat Representation of the debtor in adversary proceedings and other contested bankruptcy matters;</li> <li>e. [Other provisions as needed]</li> </ul> |                                                                                                                |
| 6.  | By agreement with the debtor(s), the above disclosed fee does not include the following services:  Litigation / Adversary Proceedings  \$400.00 for Motions to Redeem  Credit Counseling Fees                                                                                                                                                                                                                                                                                                                 |                                                                                                                |
|     | CERTIFICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                |
|     | I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for represproceeding.                                                                                                                                                                                                                                                                                                                                                                                  | sentation of the debtor(s) in this bankruptcy                                                                  |

/s/ Troy L Gleason

Gleason & Gleason

Signature of Attorney

Name of Law Firm

EMPL D CMPG dEP 6 8 1 # 006 5 006 5 15 026 5 15

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# Filed 10/07/08 Entered 10/07/08 12:25:52 Desc Main Docume arning again ment

Period Beg/End: Advice Date: Advice Number: Batch Number:

Page 001 of 001 08/31/08 - 09/13/08 09/19/2008 0003586828 07536H938

Taxable Marital Status: S Chrishonee A Fitzpatrick Exemptions/Allowances

Federal: 1, 0.00 Additional Tax State: 0.00 Additional Tax Local: 0. 0.00 Additional Tax

8243 S Peoria Chicago, IL. 60620

| Earnings  | rate | hours | this period | vear-to-date |
|-----------|------|-------|-------------|--------------|
| Regular   |      | 64.84 | 956.41      | 16977.53     |
| Holiday   |      | 8.00  | 118.00      | 590.00       |
| OvertimeA |      |       | 0.00        | 113.21       |
| RegAdjStr |      |       | 0.00        | 88.50        |
| Sick Pay  |      |       | 0.00        | 354.00       |

| JICK Fay                                     | 0.00           | 354.00            |
|----------------------------------------------|----------------|-------------------|
| Vacation                                     | 0.00           | 708.00            |
| Vac Adjust                                   | 0.00           | 118.00            |
| Ttl Hrs/Pay 72.8                             | 1 1074.41      | 18949.24          |
| Tax Deductions                               |                |                   |
|                                              |                |                   |
|                                              | £2 00          | 1105 02           |
| FED OASDI/EE                                 | 62.98          | 1105.83           |
| FED OASDI/EE<br>FED MED/EE                   | 62.98<br>14.73 | 1105.83<br>258.62 |
| FED OASDI/EE<br>FED MED/EE<br>FED Withholdng |                |                   |

204.19

365.04 41.27 2.09 1900.58

3509.22

| Deductions (Before-Tax) |       |        |
|-------------------------|-------|--------|
| B4Tx Med-I              | 49.92 | 948.48 |
| B4TXDENI                | 6.55  | 124.45 |
| Vision                  | 2.12  | 40.28  |
| 401(k)                  | 21.49 | 378.97 |
|                         |       |        |

| GARN-Writ        | 164.38 |
|------------------|--------|
| Opt Life         | 2.13   |
| Vadd             | 0.11   |
| Total Deductions | 246.70 |
| Het Pay:         | 623.52 |

Total Taxes

Other Benefits and Information this period total to date

Advice Number: 0003586828 Advice Date: 09/19/2008

Deposited to the account of Chrishonee A Fitzpatrick

Account Number

VERIFY DOCUMENT AUTHENTICITY COLORED AREA MUST THE BRICH THE BRICH THE STORY OF THE MUST THE

<u>Amount</u>

Ale Füntüls

022712 FTLBW 07536 000000 FOOT LOCKER P. O. BOX 2663 HARRISBURG, PA 17105

## րան արան 10/07/08 Entered 10/07/08 12:25:52 Desc Main Docum **Earnings 13/1999** 1

Period Beg/End: Advice Date: Advice Number: Batch Number:

Page 001 of 001 08/03/08 - 08/16/08 08/25/2008 0003566191 07536H931

Taxable Marital Status: S

Exemptions/Allowances

Ttl Hrs/Pay

Net Pay:

Federal: 1, 0.00 Additional Tax 0.00 Additional Tax State: 0.00 Additional Tax Local: Ο,

975.44

715.94

16563.32

| Chrishonee A Fitzpatrick<br>8243 S Peoria |
|-------------------------------------------|
| Chicago, IL. 60620                        |

|            |      | ·     |             |              |
|------------|------|-------|-------------|--------------|
| Earnings   | rate | hours | this period | year-to-date |
| Regular    |      | 58.13 | 857.44      | 14783.73     |
| Vac Adjust |      | 8.00  | 118.00      | 118.00       |
| OvertimeA  |      |       | 0.00        | 39.09        |
| RegAdjStr  |      |       | 0.00        | 88.50        |
| Holiday    |      |       | 0.00        | 472.00       |
| Sick Pay   |      |       | 0.00        | 354.00       |
| Vacation   |      |       | 0.00        | 708.00       |

| FED OASDI/EE   | 56.84 | 965.17  |
|----------------|-------|---------|
| FED MED/EE     | 13.30 | 225.73  |
| FED Withholdng | 84.41 | 1432.15 |
| IL Withholdng  | 24.61 | 417.84  |

| Deductions (Before-Tax) |       |         |
|-------------------------|-------|---------|
| B4Tx Med-I              | 49.92 | 848.64  |
| 84TXDENI                | 6.55  | 111.35  |
| Vision                  | 2.12  | 36.04   |
| 401(k)                  | 19.51 | 331.25  |
| Deductions (After-Tax)  |       |         |
| Opt Life                | 2.13  | 37.01   |
| Vadd                    | 0.11  | 1.87    |
| Total Deductions        | 80.34 | 1366.16 |

Other Benefits and total to date **Information** this period

Advice Date: 08/25/2008

Advice Number: 0003566191

Account Number Deposited to the account of Chrishonee A Fitzpatrick

CONTROL OF ANTHERMOLY ANTHERMOLY AND AGENCY OF THE PROPERTY SEARCH OF A PROPERTY AND SEARCH OF A PROPERTY SEARCH OF A PROPERTY O

**Amount** 

FOOT LOCKER P. O. BOX 2663 HARRISBURG, PA 17105

FOOT LOCKER

Opt Life

Net Pay:

Total Deductions

Vadd

## 

Page 001 of 001 08/17/08 - 08/30/08

Period Beg/End: Advice Date: Advice Number: Batch Number:

09/08/2008 0003577356 07536H935

Taxable Marital Status: S

Exemptions/Allowances

Federal: 1, 0.00 Additional Tax State: 0.00 Additional Tax Local: Ο, 0.00 Additional Tax

| Earnings    | rate | hours | this period | year-to-date |
|-------------|------|-------|-------------|--------------|
| OvertimeA   |      | 10.05 | 74.12       | 113.21       |
| Regular     |      | 83.89 | 1237.39     | 16021.12     |
| RegAdjStr   |      |       | 0.00        | 88.50        |
| Holiday     |      |       | 0.00        | 472.00       |
| Sick Pay    |      |       | 0.00        | 354.00       |
| Vacation    |      |       | 0.00        | 708.00       |
| Vac Adjust  |      |       | 0.00        | 118.00       |
| Itl Hrs/Pay |      | 83.89 | 1311.51     | 17874.83     |

| Tac Mujusi     |               | 110.00   |
|----------------|---------------|----------|
| Itl Hrs/Pay    | 83.89 1311.51 | 17874.83 |
| Tax Deductions |               |          |
| FED OASDI/EE   | 77.68         | 1042.85  |
| FED MED/EE     | 18.16         | 243.89   |
| FED Withholdng | 133.81        | 1565.96  |
| IL Withholdng  | 34.49         | 452.33   |
| Total Taxes    | 264.14        | 3305.03  |

| IL WICHHOIDING          | J4.42  | 405.33  |
|-------------------------|--------|---------|
| Total Taxes             | 264.14 | 3305.03 |
| Deductions (Before-Tax) |        |         |
| B4Tx Med-I              | 49.92  | 898.56  |
| B4TXDENI                | 6.55   | 117.90  |
| Vision                  | 2.12   | 38.16   |
| 401(k)                  | 26.23  | 357.48  |
| Deductions (After-Tax)  |        |         |

| FED OASDI/EE            | 77.68  | 1042.85 |
|-------------------------|--------|---------|
| FED MED/EE              | 18.16  | 243.89  |
| FED Withholdng          | 133.81 | 1565.96 |
| IL Withholding          | 34.49  | 452.33  |
| Total Taxes             | 264.14 | 3305.03 |
| Deductions (Before-Tax) | 49.92  | 898.56  |
| B4TXDENI                | 6.55   | 117.90  |
| Vision                  | 2.12   | 38.16   |
| 401(k)                  | 26.23  | 357.48  |
| Deductions (After-Tax)  |        |         |
| GARN-Writ               | 200.66 | 200.66  |

2.13

0.11 287.72

759.65

39.14 1.98

1653.88

🗚 Verify document authenticity- colored area must change in tone gerougley and evenly from darkat top to lighter at bottom

Chrishonee A Fitzpatrick 8243 S Peoria Chicago, IL. 60620

Other Benefits and

Information this period total to date



FOOT LOCKER

Advice Number: 0003577356 Advice Date: 09/08/2008

Deposited to the account of Chrishonee A Fitzpatrick

Account Number

<u>Amount</u>

EMCASECO 8+2683100661000519 022712 FTLBW 07536 000000

FOOT LOCKER P. O. BOX 2663 HARRISBURG, PA 17105 FOOT LOCKER

## Filed 10/07/08 Entered 10/07/08 12:25:52 Desc Main Docum**Earnings Statement**

Period Beg/End: Advice Date: Advice Number: Batch Number:

Page 001 of 001 06/22/08 - 07/05/08 07/14/2008 0003536306 07536H919

Taxable Marital Status: S

Exemptions/Allowances

0.00 Additional Tax Federal: 1, 0.00 Additional Tax State: 0.00 Additional Tax Local: ٥,

| Earnings rate_ | hours | this period_ | year-to-date |
|----------------|-------|--------------|--------------|
| Regular        | 61.22 | 903.01       | 12435.19     |
| Hol iday       | 8.00  | 118.00       | 472.00       |
| OvertimeA      |       | 0.00         | 39.09        |
| RegAdjStr      |       | 0.00         | 88.50        |
| Sick Pay       |       | 0.00         | 354.00       |
| Vacation       |       | 0.00         | 354.00       |
| Ttl Hrs/Pay    | 69.22 | 1021.01      | 13742.78     |

| Tax Deductions  |        |         |
|-----------------|--------|---------|
| FED OASDI/EE    | 59.67  | 801.20  |
| FED MED/EE      | 13.96  | 187.38  |
| FED Withholding | 91.11  | 1194.47 |
| IL Withholdng   | 25.95  | 347.11  |
| Total Taxes     | 190.69 | 2530.16 |

| Deductions (Before-Tax) |       |        |
|-------------------------|-------|--------|
| B4Tx Med-I              | 49.92 | 698.88 |
| B4TXDENI                | 6.55  | 91.70  |
| Vision                  | 2.12  | 29.68  |
| 401(k)                  | 20.42 | 274.83 |
| Deductions (After-Tax)  | 2 12  | 30.62  |

| OPL LITE         | F. 72  |
|------------------|--------|
| Vadd             | 0.11   |
| Total Deductions | 81.25  |
| Net Pay:         | 749.07 |

Chrishonee A Fitzpatrick 8243 S Peoria Chicago, IL. 60620

Other Benefits and

Information this period total to date

FOOT LOCKER

Advice Number: 0003536306 Advice Date: 07/14/2008

Account Number Deposited to the account of Chrishonee A Fitzpatrick

1127.25

☼ ABNIEA DOCUMENT VALHENLICITA! GOFONED WEEWINGL CHANGE IN JONE CHYDDYFTA WID EAEUT; ENOW DYNK YL LON LO FICHLEST AT 2

<u>Amount</u>

P. O. BOX 2663 HARRISBURG, PA 17105

FOOT LOCKER

V add

Net Pay:

Total Deductions

## Filed 10/07/08 Entered 10/07/08 12:25:52 Desc Main Document Plants Document Document

Page 001 of 001 Period Beg/End: 07/06/08 - 07/19/08 07/28/2008

Advice Date: Advice Number: Batch Number:

0003547233 07536H925

Taxable Marital Status: S

Exemptions/Allowances

0.00 Additional Tax Federal: 1, 0.00 Additional Tax State: 0.00 Additional Tax Local: Ο,

| Earnings         | rate      | hours  | this period | vear-to-date |
|------------------|-----------|--------|-------------|--------------|
| Regular          |           | 52.63  | 776.30      | 13211.49     |
| Vacation         |           | 8.00   | 118.00      | 472.00       |
| OvertimeA        |           |        | 0.00        | 39.09        |
| RegAdjStr        |           |        | 0.00        | 88.50        |
| Holiday          |           |        | 0.00        | 472.00       |
| Sick Pay         |           |        | 0.00        | 354.00       |
| Ttl Hrs/Pay      | ·         | 60,63  | 894.30      | 14637.08     |
| Tax Deduc        | tions     |        |             |              |
| FED OASDI/E      |           |        | 51.81       | 853.01       |
| FED MED/EE       |           |        | 12.11       | 199.49       |
| FED Withhol      | dna       |        | 72.48       | 1266.95      |
| IL Withhold      |           |        | 22.23       | 369.34       |
| Total Taxes      |           |        | 158.63      | 2688.79      |
| Deduction        | s (Befor  | e-Tax\ |             |              |
| B4Tx Med-I       | 100101    | o runj | 49.92       | 748.80       |
| B4TXDENI         |           |        | 6.55        | 98.25        |
| Vision           |           |        | 2.12        | 31.80        |
| 401(k)           |           |        | 17.89       | 292.72       |
| . ,              |           |        |             |              |
| <u>Deduction</u> | s (After- | Tax)   |             |              |
| Opt Life         |           |        | 2.13        | 32.75        |

Chrishonee A Fitzpatrick 8243 S Peoria Chicago, IL. 60620

Other Benefits and

<u>Information</u> this period total to date

FOOT LOCKER

Advice Number: 0003547233
Advice Date: 07/28/2008

Deposited to the account of Chrishonee A Fitzpatrick

Chrishonee A Fitzpatrick

Account Number: Amount 656.95

1.65

0.11

EMPLIA SUPED BEPT 61003 #0068 10067 11

0.00 Additional Tax

0.00 Additional Tax

0.00 Additional Tax

FOOT LOCKER FOOT LOCKER P. O. BOX 2663 HARRISBURG, PA 17105

Taxable Marital Status: S

o,

Exemptions/Allowances Federal: 1,

State:

Local:

## Filed 10/07/08 Entered 10/07/08 12:25:52 Desc Main Documentings Statement

Period Beg/End: Advice Date:

Page 001 of 001 07/20/08 - 08/02/08 08/11/2008

Advice Number: Batch Number:

0003556639 07536H929

Chrishonee A Fitzpatrick 8243 S Peoria

Chicago, IL. 60620

| Other | Benefits | and |
|-------|----------|-----|

| Information | this period | total to date |
|-------------|-------------|---------------|
|             |             |               |

<u>Earnings</u> rate hours 48.46 this period 714.80 vear-to-date Regular 13926.29 Vacation 16.00 236.00 708.00 OvertimeA 0.00 39.09 RegAdjStr 0.00 88.50 Holiday 0.00 472.00 Sick Pav 0.00 354.00 Ttl Hrs/Pay 64.46 950.80 15587.88 Tax Deductions FED OASDI/EE 55.32 908.33 FED MED/EE 12.94 212.43 FED Withholdng 80.79 1347.74 IL Withholdng 23.89 393.23 Total Taxes 172.94 2861.73 Deductions (Before-Tax)
B4Tx Med-I 49.92 798.72 **B4TXDENI** 6.55 104.80 Vision 2.12 33.92 401(k) 19.02 311.74 Deductions (After-Tax) Opt Life 2.13 34.88 Vadd 0.11 1.76 Total Deductions 79.85 1285.82 Het Pay:

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, 2006.

@1998

FOOT LOCKER

| Deposited to the account of Chrishonee A Fitzpatrick | Account Number | Account Number | Amount | 698.01

|                                                                        | Control                                                                       | Case 08-26831<br>Number (DCN)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Doc 1                                                                                                                                        | Filed 10/07/0<br>Document                                                                                                                                                                        |                                                                                     | 37 of                                              | 0/07/08 12:2<br>39                                                                 | 25:52    | Desc Main |
|------------------------------------------------------------------------|-------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------------------|------------------------------------------------------------------------------------|----------|-----------|
| Form <b>845</b>                                                        | 3-OL                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                              | ncome Tax Decla<br>-file Online Returi                                                                                                                                                           |                                                                                     | ļ                                                  | OMB No. 1545-0074                                                                  | _        |           |
| Department of Internal Revenu                                          | he Treas<br>e Service                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | For the year Jan                                                                                                                             | uary 1 - December 31, 2007<br>structions on page 2.                                                                                                                                              |                                                                                     |                                                    | 2007                                                                               |          |           |
| Use the                                                                | L<br>A<br>B                                                                   | Your first name and initial CHRISHONEE A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                              | Last name FITZPATRICK                                                                                                                                                                            |                                                                                     | Your soc<br>319-                                   | ial security number                                                                | _        |           |
| IRS label.<br>Otherwise,                                               | Ē                                                                             | If a joint return, spouse's first n                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ame and initial                                                                                                                              | Last name                                                                                                                                                                                        |                                                                                     | Spouse's                                           | social security no.                                                                |          |           |
| please<br>print or<br>type.                                            | H<br>E<br>R                                                                   | Home address (number and s<br>4015 RICHMOND (                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | CT                                                                                                                                           | P.O. box, see instructions.                                                                                                                                                                      | Apt. no.                                                                            |                                                    | Important!  ou must enter ur SSN(s) above.                                         | _        |           |
|                                                                        | E                                                                             | City, town or post office, state, MATTESON, IL 60                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 0443                                                                                                                                         |                                                                                                                                                                                                  |                                                                                     | Daytime (708)                                      | phone number 283 – 4233                                                            |          |           |
| Part 1                                                                 | Tax F                                                                         | Return Information (Wh                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ole dollars on                                                                                                                               | ly)                                                                                                                                                                                              |                                                                                     |                                                    |                                                                                    | _        |           |
| 1 Adjusted                                                             | gross in                                                                      | come (Form 1040, line 38; Form                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 1040A, line 22; For                                                                                                                          | m 1040EZ, line 4)                                                                                                                                                                                |                                                                                     | 1                                                  | 26,047.                                                                            | <u>•</u> |           |
| 2 Total tax                                                            | (Form 10                                                                      | 940, line 63; Form 1040A, line 37                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ; Form 1040EZ, line                                                                                                                          | 10)                                                                                                                                                                                              | and Assert                                                                          | 2                                                  | 2,200.                                                                             | <u>•</u> |           |
| 3 Federalin                                                            | ncome ta                                                                      | xwithheld (Form <b>19</b> 40, line <b>64</b> ;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Form 104090 line 38                                                                                                                          | i; Foggi (1040EZ, line 7)                                                                                                                                                                        |                                                                                     | 3                                                  | 2,655.                                                                             | <u>.</u> |           |
| 4 Refund (                                                             | Form 10                                                                       | 40, line 74a; Form 2040A, the 44                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | la Form 4040EZ, lir                                                                                                                          | e <b>(11</b> a; Fo <b>rmo (</b> 1040)-SS, Part I                                                                                                                                                 | ¶me 12a)                                                                            | 4                                                  | 455.                                                                               | <u>.</u> |           |
| 5 Amounty                                                              | ou owe                                                                        | (Form 1040, line 76; Form 1040/<br>Iration of Taxpayer. Be                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | A, line 46; Form 104                                                                                                                         | OEZ, line 12) (see instructions                                                                                                                                                                  | s)                                                                                  | . 5                                                |                                                                                    | _        |           |
| b ldo c lau acc lfui Fec                                               | o not wan<br>othorize to<br>count indi<br>other und<br>deral Tax<br>orber (PI | at my refund be directly deposited.  at my refund be directly deposited.  It direct deposit of my refund or the U.S. Treasury and its designation that the tax preparation sof lerstand that this authorization in the tax preparation of tax preparation o | I am not receiving a<br>ated Financial Ager<br>tware for payment of<br>nay apply to future<br>rder for me to initial<br>rization is to seman | e appointment of the other s refund.  It to initiate an ACH electronic of my federal taxes owed on t ederal tax payments that I di out the payments in request in full force and effect until In | funds withdrawai<br>his tax return and/<br>rect to be debited<br>hat the IRS send n | entry to the toor a paymenthrough the me a persona | ne refund.  financial institution t of estimated tax. Electronic al identification |          |           |
| tott                                                                   | ne paym                                                                       | ation. To revoke a payment, I m<br>ent (settlement) date. I also auti<br>information necessary to answe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | woode the financial i                                                                                                                        | nstitutions involved in the pro                                                                                                                                                                  | cessing of the elec                                                                 | no later than<br>ctronic paym                      | 2 business days prior<br>ent of taxes to receive                                   |          |           |
| liability and all                                                      | applicat                                                                      | edue tax return, I understand the<br>die interest and penalties. If I hav<br>ill be rejected.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | at if the IRS does no<br>re filed a joint federa                                                                                             | t receive full and timely paym<br>Il and state tax return, and the                                                                                                                               | ent of my tax liabili<br>ere is an error on m                                       | ty, i will rema<br>ny federal tax                  | nin liable for the tax<br>return, I understand                                     |          |           |
| statements for<br>amounts in Pa<br>ransmitter to s<br>rejection of the | rtie tax:<br>rtiabov<br>send my                                               | jury, I declare that I have examinate and ing December 31, 2007 e are the amounts shown on the tax return, to the IRS and to receission, (b) an indication of any re                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | , and to the best of i<br>e copy of my electro-<br>eive from the followi<br>efund offset, (c) the i                                          | my knowledge and belief, it is<br>nic income tax return. I conse<br>ng information from the IRS:                                                                                                 | true, correct, and<br>nt to allow my inte                                           | complete. I i<br>rmediate ser                      | further declare that the                                                           |          |           |
|                                                                        | L signati                                                                     | ire documents have not been re                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | eceived for the past                                                                                                                         | two years, if required, and (e)                                                                                                                                                                  | the date of any re                                                                  | fund.                                              | ay not including that                                                              |          |           |

Form 8453- OL (2007)

KBA For Paperwork Reduction Act Notice, see separate instructions.

Certificate Number: 03788-ILN-CC-005020270

## **CERTIFICATE OF COUNSELING**

| I CERTIFY that on September 29, 2008        | , a        | t 11:00      | o'clock AM EDT ,                  |
|---------------------------------------------|------------|--------------|-----------------------------------|
| Chrishonee Fitzpatrick                      |            | receiv       | ed from                           |
| Alliance Credit Counseling, Inc.            |            | <u> </u>     | ,                                 |
| an agency approved pursuant to 11 U.S.C.    | § 111 to   | provide cred | it counseling in the              |
| Northern District of Illinois               | , a        | n individual | [or group] briefing that complied |
| with the provisions of 11 U.S.C. §§ 109(h   | ) and 111  |              |                                   |
| A debt repayment plan was not prepared      | If a c     | lebt repayme | nt plan was prepared, a copy of   |
| the debt repayment plan is attached to this | certificat | te.          |                                   |
| This counseling session was conducted by    | internet   |              | ·                                 |
|                                             |            |              |                                   |
| Date: September 29, 2008                    | Ву         | /s/Angela Sl | nannon                            |
|                                             | Name       | Angela Shar  | non                               |
|                                             | Title      | Accredited C | Credit Counselor                  |
|                                             |            |              |                                   |
|                                             |            |              |                                   |

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Case 08-26831

Doc 1 Filed 10/07/08 United States Bankruntcy Court Northern District of Illinois

# Entered 10/07/08 12:25:52 Desc Main Page 39 of 39

(Joint Debtor)

| IN RE:                                                                                                                                                                                                                                                                                                                                                                                                                                            | Case No.                                                                                                                                                                                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Fitzpatrick, Chrishonee A                                                                                                                                                                                                                                                                                                                                                                                                                         | Chapter 7                                                                                                                                                                                                 |
| Debtor(s)                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                           |
| DECLARATION REGARDII<br>Signed by Debtor(s) or C<br>To Be Used When Fili                                                                                                                                                                                                                                                                                                                                                                          | Corporate Representative                                                                                                                                                                                  |
| PART I - DECLARATION OF PETITIONER  A. To be completed in all cases.                                                                                                                                                                                                                                                                                                                                                                              | Date: September 20, 2008                                                                                                                                                                                  |
| I (We) Chrishonee A Fitzpatrick and officer, partner, or member, hereby declare under penalty of perjury correct social security number(s) and the information provided in the capplication to pay filing fee in installments, is true and correct. It is schedules, and this DECLARATION to the United States Bankruptc with the Clerk in addition to the petition. I(we) understand that failure pursuant to 11 U.S.C. sections 707(a) and 105. | electronically filed petition, statements, schedules, and if applicable, we) consent to my(our) attorney sending the petition, statements, by Court. I(we) understand that this DECLARATION must be filed |
| B. To be checked and applicable only if the petitioner is an includent and who has (or have) chosen to file under chapter 7.                                                                                                                                                                                                                                                                                                                      | dividual (or individuals) whose debts are primarily consumer                                                                                                                                              |
| I(we) am(are) aware that I(we) may proceed under chapter 7 relief available under each such chapter; I(we) choose to pro                                                                                                                                                                                                                                                                                                                          | 7, 11, 12, or 13 of Title 11 United States Code; I(we) understand the occed under chapter 7; and I(we) request relief in accordance with                                                                  |
| C. To be checked and applicable only if the petition is a corpor                                                                                                                                                                                                                                                                                                                                                                                  | ration, partnership, or limited liability entity.                                                                                                                                                         |
| C. To be checked and applicable only if the petition is a corpor  I declare under penalty of perjury that the information provide to file this petition on behalf of the debtor. The debtor reques                                                                                                                                                                                                                                                | led in this petition is true and correct and that I have been authorized sts relief in accordance with the chapter specified in the petition.                                                             |

(Debtor or Corporate Officer, Partner or Member)

Signature:

@ 1993-20C

Signature: